


**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JAN 17 AM 8:21

DOCUMENT # A33115 1. Entity Name HENRY & COMPANY, LTD.	
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Principal Place of Business 450 ROYAL PALM WAY, SUITE 502 PALM BEACH, FL 33480	Mailing Address 450 ROYAL PALM WAY, SUITE 502 PALM BEACH, FL 33480
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc. SUITE 401	Suite, Apt. #, etc. SUITE 401
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City & State	City & State
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Zip	Country	Zip	Country
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01062006 Chg-LP CR2E003 (11/05)

6. Name and Address of Current Registered Agent HENRY, PATRICK #11 450 ROYAL PALM WAY, SUITE 401 PALM BEACH, FL 33480	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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4. FEI Number 65-0342067	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	HENRY, PATRICK 450 ROYAL PALM WAY, SUITE 401 PALM BEACH, FL 33480	STREET ADDRESS	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP		CITY - ST - ZIP	
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**300864997579
02/01/06--01076--001 **\$08.75**

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: Patrick Henry **PATRICK HENRY** 1-10-06 561-832-3101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #